Department of Medical Assistance Services
600 East Broad Street
Suite 1300
Richmond, VA 23219

https://dmas.virginia.gov
MEDICAID MEMO

Last Updated: 03/09/2022

Updates and Clarification of the Inpatient Prior Authorization Process for Inpatient Acute Care Services

The purpose of this memorandum is to provide periodic updates and clarification for the prior authorization (PA) process with Virginia Medicaid's PA contractor, Keystone Peer Review Organization (KePRO). This memorandum is one in a series of updates that will assist providers in obtaining PA-related information that will expedite the review process. We understand that some providers still are experiencing delays however, we are seeing progress in the correct submission of Prior Authorizations by providers and in the number of PAs being processed by KePRO. We appreciate the provider input and suggestions given to us which have helped facilitate a greater understanding of providers' needs. We ask for your patience and understanding during this transition as we continue to improve upon the current process.

Timely Filing Requirements

Starting January 1, 2007, timely submission for requests will again be applied and determinations will be made based on timeliness. DMAS has extended the relaxed requirement of timely submission for PA requests through December 31, 2006. This applies for request dates beginning on the KePRO implementation date of your specific service provision.

New Developments from DMAS and KePRO

Prior Authorization Advisory Group

DMAS and KePRO have jointly worked together to develop a Prior Authorization Advisory Group (PAAG). The first meeting was held in Charlottesville on October 31, 2006.

- The purpose of the PAAG is to provide a forum for providers in the healthcare community to give input on education and planning with KePRO.
- Members will disseminate information to their provider groups.

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- Goals are to provide continual feedback on the transition and implementation processes; to develop an education plan for providers in regards to the PA process; and to have all providers using iEXCHANGE in order to expedite the PA process.
- The PAAG helps select appropriate topics for education, to include education on change methodologies and process redesign, to include best practices and the opportunity for process to share with each other their success and lessons learned in order to help each other in an efficient, cost effective manner.
- The PAAG member representatives are listed at the end of this memo. Providers may contact their respective representative to obtain or provide information appropriate to meet the goals of the PAAG.
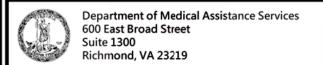- Meetings will be held three times per year.

Quarterly Newsletter from KePRO

KePRO has developed a newsletter, ***Insider***, for providers to keep them up to date on various issues.

- The newsletter is available for review and downloading at the DMAS/KePRO website: http://dmas.kepro.org.

Helpful Submission Tips for Quickest Processing

- When submitting additional information on an open case, it is preferred that the additional information is submitted through the same media type as the initial request. For example, if you make an initial request through iEXCHANGE and need to submit additional information, it is preferred that you make the request to add information via iEXCHANGE. If the initial request is made via fax, then submitting additional information is preferred by fax.

- For Out-of-State Acute Inpatient Hospital stays, no prior authorization through KePRO is required unless the Provider Enrollment Unit (PEU) has assigned your facility an "in-state" class type and you have been required to obtain PA prior to KePRO's implementation.

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Information Regarding Pends

Pend is the general term used to indicated that the case has been received and is awaiting a decision, for any reason. A case detail line may be pended:

1. While it is in queue for clinical review.
2. Because it was submitted with insufficient information to complete the clinical review (An "Additional Information" letter will be sent to the provider).
3. While the case is being reviewed by a physician consultant.

- If the detail line is pended due to #2 or #3, a note will be available for review in the "iEXCHANGE Additional Comments" section of the case explaining the cause.

The overall Case Status will continue to indicate "PEND" even if some of the detail lines are approved or denied. If any detail lines are left pended for any reason, the Case Status will remain "PEND"."

Submission Tips for Inpatient Psychiatric Requests

For the quickest turnaround time, please keep in mind the following tips.

- Admission reviews should include: precipitating event, safety risk, and mental status exam, all relevant psycho social and medical history. Substance abuse history needs to be included if applicable.

- Prescreening information needs to include the date, the locality and the pre-

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screener's name. This information is needed for all free-standing facilities.

- The correct Service Type (0401- Inpatient Psychiatric or 0093- EPSDT Inpatient [freestanding] Psychiatric) needs to be submitted with each entry. Failure to submit a service code, or submitting an incorrect service code, will delay the case review.

- All clinical entries need to be labeled and dated and need to specifically refer to the certification span requested. <u>The clinical entries must clearly address the need for the requested certification span</u>. This would include all administrations of medications, any special procedures, such as seclusion/restraint, and information specific to the need for special precautions.

- TDO (Temporary Detention Order) admission requests need to include the date of the hearing, and the outcome of the hearing (if known). Request days for TDO admissions should correlate with the number of days expected for the hearing and disposition to occur.

- The Treatment Plan must include goals of the hospitalization.

- Documentation needs to include dates of individual, group and family therapies, as well as the patient's level of participation and responses specific to these treatments.

<u>Submission Tips for Acute (Med/Surg) Inpatient Requests</u>

- For retro reviews for retroactive Medicaid eligibility **determined within 6 months** of care being provided, submit the request as you do for current admissions. Please do not send the entire medical record. It will only slow processing of your request.

- For retro reviews for retroactive Medicaid eligibility **determined greater**

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than 6 months from the start of care, submit these requests to DMAS by fax at 1-866-248-8796 or (804) 225- 2603.

- When submitting a request for inpatient services, be sure you are checking the appropriate PA Service Type (0400- Inpatient Acute Admission) in iEXCHANGE or on the DMAS 362 (Inpatient Prior Authorization Request form).

Resource Information

- Use the DMAS 362 (Inpatient Prior Authorization Request form) for submission of your inpatient request. This form and instructions for use are located under "forms" on KePRO's website http://dmas.kepro.org or at www.dmas.virginia.gov/pr-prior_authorization.htm.

- Should you have any questions regarding the prior authorization process, please send your inquiries via e-mail to **providerissues@kepro.org** or **PAUR06@dmas.virginia.gov**. Remember do not send PHI by e-mail unless it is sent via a secure encrypted e-mail submission.

- All other Medicaid provider issues not related to prior authorization should be addressed through the Provider Helpline. The numbers are 1-800-552-8627 or if you are located in Richmond or out-of-state call 804-786-6273.

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KePRO Contact Information	DMAS and KePRO Website Resources
KePRO Contact Information You may contact KePRO through the following methods: **iEXCHANGE:** **http://dmas.kepro.org/** **Toll Free Phone:** 1-888-VAPAUTH (1-888-827- 2884) **Local Phone:** (804) 622-8900 **Fax:** 1-877-OKBYFAX (1-877-652-9329) **Mail:** 2810 N. Parham Road, Suite 305, Richmond, VA 23294 **Provider Issues:** ProviderIssues@kepro.org	**DMAS and KePRO Website Resources** *The following resources are available on the DMAS and KePRO websites:* 1. iExchange Registration information 2. ICD9 diagnosis codes, outpatient rehab and home health revenue codes, and radiological scan procedure codes 3. Recent PA provider training presentations 4. Prior Medicaid Memos 5. PA Fax Request Forms and Instructions 6. PA Reference Guides 7. KePRO "Insider" Provider newsletter

Alternate Methods to Obtain PA, Eligibility and Claims Status Information

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is http://virginia.fhsc.com. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider. Providers may also access prior authorization information including status via iEXCHANGE at http://dmas.kepro.org/.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the "DMAS Content Menu" column on the left-hand side of the DMAS web page for the "Provider Services" link, which takes you to the "Manuals, Memos and Communications" link. This link opens up a page that contains all of the various communications to providers, including Provider Manuals and Medicaid

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Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting

Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates that are requested.

PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at: www.dmas.virginia.gov/pr-provider_newletter.asp.

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.

Attached Number of Pages: (2)

**Prior Authorization
Advisory Group**

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Purpose:

To provide a forum for providers in the healthcare community to give input on education and planning with the new Prior Authorization contractor, KePRO. In addition, this will benefit all providers as they can quickly and efficiently disseminate information to their members.

Goals:

- To provide continual feedback on the transition and implementation processes
- To develop an education plan for providers in regards to the Prior Authorization process
- Have all providers using iEXCHANGE in order to expedite the Prior Authorization process

Activities:

- Help select appropriate topics for education, to include education on change methodologies and process redesign
- Include best practices and the opportunity for providers to share with each other their successes and lessons learned in order to help each other in an efficient, cost effective manner

Membership:

Inpatient – Med/Surg

Scarlett Rucker, RHIT, LPN, CPUR, CCS

Director of Health Information Management/
Utilization Management/Coding/Insurance
Verification

Twin County Regional Healthcare, Inc.

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Mary S. Dias,
Director Revenue
Outcomes/Analysis
Inova Health System

Patricia Steinbach, Director for

Case Management and
Utilization Review Carilion
Medical Center

Holly Bradley-Carter, MT, BS
(ASCP) PCAD Manager

UVA Medical
Center
Outpatient
Psych

Terri A. Tuck, President

Healthcare Administrative Services, LLC

DME

Lisa C. Westen, Supervisor, Intake
and Billing Roberts Home Medical

Outpatient Rehab

Debbie Chapel,
RN, CCM Case
Manager

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Children's Hospital of the King's Daughters Inpatient Psychiatric

Ruth Poignant,
RN Adult Psych.
Unit- M3 Virginia
Baptist Hospital

NEOP

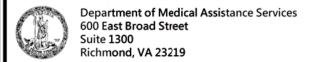Amy Isakson, Marketing/Business Operations Manager UVA Imaging at Fontaine

Home Health

Marcia Tetterton, Executive Director Virginia Association for Home Care

Treatment Foster Care

Kim Folden, MSW, LCSW
Roanoke/Lynchburg Unit
Director/Therapist Braley &
Thompson, Inc.

Treatment Foster Care Case Management

Patricia Morris-
Howard, RNC
Utilization Review

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Bridges
Treatment Center
<u>Waiver</u>

Bonnie Gordon, RN, CEO &
Administrator Family Care, Inc.